| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF CALIFORNIA | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|---|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar licen Bring iden | e the name that is on a government-issued ure identification (for apple, your driver's use or passport). If your picture tification to your ting with the trustee. | Nicholas First name Ryan Middle name Perry Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | used Inclu | other names you have d in the last 8 years ude your married or den names. | Nicholas Perry | |
| 3. | you num Indi | y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number | xxx-xx-2203 | |

Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 1 of 47 Voluntary Petition for Individuals Filing for Bankruptcy

| Deb | otor 1 Nicholas Ryan Pe | rry | Case number (if known) | | |
|-----|---|---|--|--|--|
| | | | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | |
| | | EINs | EINs | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 2094 Tenaya Court Brentwood, CA 94513 | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | County Costa | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

| 7. | The chapter of the Bankruptcy Code you are | | | | each, see <i>Notice Required by</i> age 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bar e box. | nkruptcy |
|---|---|---------|--|----------------------|---|--|------------|
| | choosing to file under | ■ Chapt | er 7 | | | | |
| | | ☐ Chapt | er 11 | | | | |
| | | ☐ Chapt | er 12 | | | | |
| | | ☐ Chapt | er 13 | | | | |
| 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local of about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashio order. If your attorney is submitting your payment on your behalf, your attorney may pay with a cred a pre-printed address. | | | urself, you may pay with cash, cashier's check | k, or money | | | |
| | | | | | Iments. If you choose this optic Official Form 103A). | n, sign and attach the Application for Individua | als to Pay |
| | | ☐ Ire | quest th | at my fee be waiv | ed (You may request this option | n only if you are filing for Chapter 7. By law, a juur income is less than 150% of the official pove | |
| | | app | olies to yo | ur family size and | you are unable to pay the fee ir | installments). If you choose this option, you mial Form 103B) and file it with your petition. | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | |
| | last 8 years? | ☐ Yes. | | | | | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. | Go to | line 12. | | | |
| | | ☐ Yes. | Has y | our landlord obtain | ed an eviction judgment agains | t you? | |
| | | | | No. Go to line 12 | | | |
| | | | | Yes. Fill out Initia | al Statement About an Eviction | Judgment Against You (Form 101A) and file it a | as part of |

Case number (if known)

Debtor 1 Nicholas Ryan Perry

| Deb | tor 1 Nicholas Ryan Pe | rry | | | Case number (if known) |
|------|---|-----------|---|--|--|
| | | | | | |
| Part | Report About Any Bu | sinesses | You Owr | າ as a Sole Proprie | tor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | e and location of bus | siness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | |
| | If you have more than one sole proprietorship, use a | | Numb | per, Street, City, Stat | te & ZIP Code |
| | separate sheet and attach it to this petition. | | Chec | k the appropriate bo | ox to describe your business: |
| | n to time political. | | | | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | · · | lefined in 11 U.S.C. § 101(53A)) |
| | | | | • | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | - ' ' ' |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | deadlines | s. If you in ns, cash-f S.C. 1116 I am i I am f Code | ndicate that you are low statement, and f (1)(B). not filing under Chapfiling under Chapfiling under Chapter | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure oter 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Part | Report if You Own or | Have Any | / Hazardo | ous Property or An | y Property That Needs Immediate Attention |
| 14. | Do you own or have any property that poses or is | ■ No. | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is , why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | |
| | • | | | | Number, Street, City, State & Zip Code |
| | | | | | |

Debtor 1 Nicholas Ryan Perry

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

|] | I am not required to receive a briefing about credit |
|---|--|
| | counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Debtor 1 Nicholas Ryan Perry | | | | | Case number (if known) | | |
|------------------------------|--|---------------------|---|---|---|---|--|
| Par | 6: Answer These Questi | ons for R | eporting Purposes | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily cons individual primarily for a persona | | | in 11 U.S.C. § 101(8) as "incurred by an | |
| | | | ☐ No. Go to line 16b. | | | | |
| | | | Yes. Go to line 17. | | | | |
| | | 16b. | Are your debts primarily busin | | | , | |
| | | | ☐ No. Go to line 16c. | | | | |
| | | | ☐ Yes. Go to line 17. | | | | |
| | | 16c. | State the type of debts you owe | that are not consumer | r debts or business de | ebts | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. | Go to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do y are paid that funds will be availa | | | is excluded and administrative expenses | |
| | administrative expenses are paid that funds will | | ■ No | | | | |
| | be available for distribution to unsecured creditors? | | Yes | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | 2 5,001-50,000 | |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,000 | | 50,001-100,000 | |
| | | ☐ 100-1 ☐ 200-9 | | □ 10,001-25,000 | | ☐ More than100,000 | |
| 19. | How much do you estimate your assets to be worth? | \$0 - \$ | | ☐ \$1,000,001 - \$ ² | | \$500,000,001 - \$1 billion | |
| | | □ \$100, | 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$10,000,001 - \$ □ \$50,000,001 - \$ □ \$100,000,001 - | \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | |
| 20. | How much do you estimate your liabilities | \$0 - \$ | 550,000 | \$1,000,001 - \$ | | □ \$500,000,001 - \$1 billion | |
| | to be? | | 001 - \$100,000 | □ \$10,000,001 - \$ □ \$50,000,001 - \$ | | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | |
| | | _ | 001 - \$500,000 001 - \$1 million | ☐ \$100,000,001 - C | | ☐ More than \$50 billion | |
| Par | 7: Sign Below | | | | | | |
| For | you | I have ex | camined this petition, and I declare | e under penalty of perj | jury that the information | on provided is true and correct. | |
| | | | | | nay proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, each chapter, and I choose to proceed under Chapter 7. | | |
| | | | rney represents me and I did not not, I have obtained and read the no | | | attorney to help me fill out this | |
| | | I request | relief in accordance with the chap | pter of title 11, United | States Code, specifie | d in this petition. | |
| | | bankrupt and 357 | cy case can result in fines up to \$1. | | | operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, | |
| | | Nichola | olas Ryan Perry as Ryan Perry | | ignature of Debtor 2 | | |
| | | Signatur | e of Debtor 1 | | | | |
| | | Executed | | E | xecuted on | | |
| | | | MM / DD / YYYY | | MM / DI | D / YYYY | |

| For your attorney, if you are represented by one fyou are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. /s/ E. Vincent Wood Signature of Attorney for Debtor E. Vincent Wood Printed name The Law Offices of E. Vincent Wood Firm name 1501 N. Broadway, Suite 261 Walnut Creek, CA 94596 Number, Street, City, State & ZIP Code | Debtor 1 Nicholas Ryan Pe | erry | Cas | ee number (if known) |
|--|------------------------------|--|-----------------------------|---|
| and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. S E. Vincent Wood Signature of Attorney for Debtor | | under Chapter 7, 11, 12, or 13 of title 11, Unit | ted States Code, and have e | explained the relief available under each chapter |
| Signature of Attorney for Debtor E. Vincent Wood Printed name The Law Offices of E. Vincent Wood Firm name 1501 N. Broadway, Suite 261 Walnut Creek, CA 94596 | an attorney, you do not need | and, in a case in which § 707(b)(4)(D) applies | | |
| Signature of Attorney for Debtor E. Vincent Wood Printed name The Law Offices of E. Vincent Wood Firm name 1501 N. Broadway, Suite 261 Walnut Creek, CA 94596 | . 5 | /s/ E. Vincent Wood | Date | July 12, 2019 |
| Printed name The Law Offices of E. Vincent Wood Firm name 1501 N. Broadway, Suite 261 Walnut Creek, CA 94596 | | | | |
| The Law Offices of E. Vincent Wood Firm name 1501 N. Broadway, Suite 261 Walnut Creek, CA 94596 | | E. Vincent Wood | | |
| Firm name 1501 N. Broadway, Suite 261 Walnut Creek, CA 94596 | | Printed name | | |
| 1501 N. Broadway, Suite 261 Walnut Creek, CA 94596 | | The Law Offices of E. Vincent Wood | | |
| Walnut Creek, CA 94596 | | Firm name | | |
| Walnut Creek, CA 94596 | | 1501 N. Broadway, Suite 261 | | |
| Number, Street, City, State & ZIP Code | | • • | | |
| | | Number, Street, City, State & ZIP Code | | |

Email address

vince@woodbk.com

Contact phone (925) 278-6680

297132 CA Bar number & State

Official Form 101 Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 7 of 47

| Fill in this infor | mation to identify your | case: | | | |
|------------------------|--------------------------|---------------------|---------------|--|--------------------------------------|
| Debtor 1 | Nicholas Ryan Pe | Nicholas Ryan Perry | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF CALIFORNIA | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| | | | | | sondod ming |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|--|--------------|-------------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 40,260.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 40,260.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 31,010.40 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 1,337.00 |
| | Your total liabilities | \$ | 32,347.40 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,591.99 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,894.41 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other scl | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

12/15

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,067.03

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Fill in this info | rmation to identify your ca | se and this filing: | | | |
|---------------------------------------|--|-------------------------------------|---|----------------------|--|
| Debtor 1 | Nicholas Ryan Perr | v | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | | | | | |
| United States E | Bankruptcy Court for the: N | ORTHERN DISTRICT | OF CALIFORNIA | | |
| Case number | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| ow: E | 4.00 A /D | | | | |
| _ | orm 106A/B | | | | |
| Schedu | le A/B: Prope | rty | | | 12/15 |
| nformation. If mo Answer every quo | ore space is needed, attach a sestion. | separate sheet to this form | d people are filing together, both n. On the top of any additional pa | | |
| Do you own o | r have any legal or equitable in | starast in any rasidanca l | puilding, land, or similar property? |) | |
| i. Do you own o | nave any legal of equitable in | iterest in any residence, t | ounding, land, or similar property: | | |
| No. Go to P | art 2. | | | | |
| ☐ Yes. Where | e is the property? | | | | |
| | | | | | |
| Part 2: Describ | e Your Vehicles | | | | |
| | | | | | |
| | | | nicles, whether they are regist ule G: Executory Contracts and I | | ehicles you own that |
| someone eise u | ilves. Il you lease a verilcie, | also report it on scriedo | ile O. Executory Contracts and t | onexpired Leases. | |
| 3. Cars, vans, | trucks, tractors, sport utilit | y vehicles, motorcycle | es | | |
| □ No | | | | | |
| ■ Yes | | | | | |
| | | | | | |
| 3.1 Make: | Harley Davidson | Who has an inter | est in the property? Check one | | claims or exemptions. Put |
| Model: | FLHX Street Glide | ■ Debtor 1 only | | | red claims on Schedule D: nims Secured by Property. |
| Year: | 2012 | ☐ Debtor 2 only | | Current value of the | Current value of the |
| Approxim | ate mileage: 46,00 | Debtor 1 and D | ebtor 2 only | entire property? | portion you own? |
| Other info | | At least one of | the debtors and another | | |
| | Condition | | | \$22,460.00 | \$22,460.00 |
| | n: 2094 Tenaya Court, ood CA 94513 | (see instructions) | s community property | | ΨΣΣ,400.00 |
| Dicitiv | 000 04 04010 | | | | |
| 3.2 Make: | GMC | Who has an inter | est in the property? Check one | | claims or exemptions. Put |
| Model: | Sierra SLE | Debtor 1 only | | | nims Secured by Property. |
| Year: | 2006 | ☐ Debtor 2 only | | Current value of the | Current value of the |
| Approxim | ate mileage: 167,00 | | Debtor 2 only | entire property? | portion you own? |
| Other info | ormation: | | the debtors and another | | |
| | ondition | | | ¢6 025 00 | ¢c 005 00 |
| | n: 2094 Tenaya Court, ood CA 94513 | Check if this is (see instructions) | s community property | \$6,925.00 | \$6,925.00 |
| · · · · · · · · · · · · · · · · | | · 1 | | | |

| Debtor 1 | Nicholas Ryan Perry | Cas | se number (if known) | |
|--------------------|---|--|--|--|
| Othe Very Loc Brei | FE 250 Dirt Bike 2018 oximate mileage: 700 r information: V Good Condition ation: 2094 Tenaya Court, ntwood CA 94513 aft, aircraft, motor homes, ATVs | Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) and other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle according to the property of | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$9,000.00 | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$9,000.00 |
| | | own for all of your entries from Part 2, including any | | \$38,385.00 |
| Part 3: Des | scribe Your Personal and Household | e that number hereltems interest in any of the following items? | => | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | | oods and furniture 4 Tenaya Court, Brentwood CA 94513 | | \$1,000.00 |
| □ No | es: Televisions and radios; audio, v including cell phones, cameras. Describe iPhone | ideo, stereo, and digital equipment; computers, printers media players, games 4 Tenaya Court, Brentwood CA 94513 | s, scanners; music collec | tions; electronic devices |
| Example ■ No | ples of value | s, prints, or other artwork; books, pictures, or other art | objects; stamp, coin, or b | aseball card collections; |
| Example No | ent for sports and hobbies es: Sports, photographic, exercise, musical instruments Describe | and other hobby equipment; bicycles, pool tables, golf | clubs, skis; canoes and l | xayaks; carpentry tools; |
| ■ No | ns les: Pistols, rifles, shotguns, ammu Describe | inition, and related equipment | | |

Official Form 106A/B Schedule A/B: Property page 2

| Debtor 1 Nicholas Ryan Perry | Case number (if know | n) |
|--|---|---|
| 11. Clothes Examples: Everyday clothes, furs, leather coats, desi | signer wear, shoes, accessories | |
| ☐ No ■ Yes. Describe | | |
| Clothing and Shoes | | |
| | Court, Brentwood CA 94513 | \$100.00 |
| 12. Jewelry | gement rings, wedding rings, heirloom jewelry, watches, gems | , gold, silver |
| 13. Non-farm animals | | |
| Examples: Dogs, cats, birds, horses ■ No | | |
| ☐ Yes. Describe | | |
| ■ No | not already list, including any health aids you did not list | |
| ☐ Yes. Give specific information | | |
| 15. Add the dollar value of all of your entries from Part 3. Write that number here | art 3, including any entries for pages you have attached | \$1,300.00 |
| Part 4: Describe Your Financial Assets | | |
| Do you own or have any legal or equitable interest in | any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. Cash Examples: Money you have in your wallet, in your ho □ No ■ Yes | ome, in a safe deposit box, and on hand when you file your per | tition |
| | Cash in Wallet | \$40.00 |
| 17. Deposits of money Examples: Checking, savings, or other financial accoinstitutions. If you have multiple accounts □ No ■ Yes | ounts; certificates of deposit; shares in credit unions, brokerag s with the same institution, list each. Institution name: | e houses, and other similar |
| | Bank of the West | |
| 17.1. Checking | Acct 4004 | \$535.00 |
| 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with bro ■ No □ Yes | | |
| 19. Non-publicly traded stock and interests in incorporation joint venture | orated and unincorporated businesses, including an inter | est in an LLC, partnership, and |
| ■ No | | |
| ☐ Yes. Give specific information about them | % of ownership: | |
| 20. Government and corporate bonds and other nego Negotiable instruments include personal checks, cas Non-negotiable instruments are those you cannot tra | shiers' checks, promissory notes, and money orders. | |

Schedule A/B: Property page 3 Саse: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 12 of 47 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Official Form 106A/B

| D | ebtor 1 | Nicholas Ryan Perry | Case number (if known) | |
|-----|------------------|--|--|---|
| | ■ No □ Yes. | Give specific information about them Issuer name: | | |
| 21. | | nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 4 | 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plar | os |
| | ☐ Yes. | List each account separately. Type of account: | Institution name: | |
| 22. | Your s | | made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications companies, | or others |
| | _ | | Institution name or individual: | |
| 23. | . Annuit ■ No | ies (A contract for a periodic payment | of money to you, either for life or for a number of years) | |
| | ☐ Yes | Issuer name and descr | iption. | |
| 24 | | s in an education IRA, in an accour C. §§ 530(b)(1), 529A(b), and 529(b)(| nt in a qualified ABLE program, or under a qualified state tuition progra 1). | m. |
| | ☐ Yes | Institution name and de | escription. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | ■ No | equitable or future interests in pro Give specific information about them. | perty (other than anything listed in line 1), and rights or powers exercis | sable for your benefit |
| 26 | | · | | |
| ∠0. | | | crets, and other intellectual property s, proceeds from royalties and licensing agreements | |
| | ☐ Yes. | Give specific information about them. | | |
| 27. | | es, franchises, and other general in bles: Building permits, exclusive licens | ntangibles les, cooperative association holdings, liquor licenses, professional licenses | |
| | | Give specific information about them. | | |
| M | oney or | property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | . Tax ref | unds owed to you | | |
| | | Give specific information about them, | including whether you already filed the returns and the tax years | |
| 29 | Examp | support oles: Past due or lump sum alimony, s | pousal support, child support, maintenance, divorce settlement, property set | tlement |
| | ■ No □ Yes. | Give specific information | | |
| 30. | | amounts someone owes you oles: Unpaid wages, disability insurand benefits; unpaid loans you made | ce payments, disability benefits, sick pay, vacation pay, workers' compensat to someone else | ion, Social Security |
| | _ | Give specific information | | |
| 31. | | ts in insurance policies oles: Health, disability, or life insurance | e; health savings account (HSA); credit, homeowner's, or renter's insurance | |

Official Form 106A/B Schedule A/B: Property page 4

| Debtor 1 | Nicholas Ryan Perry | Case number (if known) | |
|---------------------------|--|---|----------------------------|
| ☐ Yes. | Name the insurance company of each policy and list its value. Company name: | Beneficiary: | Surrender or refund value: |
| If you somed | terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died. Give specific information | ance policy, or are currently entitled to rec | eive property because |
| Exam _l ■ No | s against third parties, whether or not you have filed a lawsuit or ples: Accidents, employment disputes, insurance claims, or rights to be describe each claim | | |
| ■ No | contingent and unliquidated claims of every nature, including co | ounterclaims of the debtor and rights to | set off claims |
| ■ No | nancial assets you did not already list Give specific information | | |
| | the dollar value of all of your entries from Part 4, including any eart 4. Write that number here | | \$575.00 |
| Part 5: De | scribe Any Business-Related Property You Own or Have an Interest In. L | ist any real estate in Part 1. | |
| No. Go | own or have any legal or equitable interest in any business-related proper to Part 6. Go to line 38. | erty? | |
| | escribe Any Farm- and Commercial Fishing-Related Property You Own or you own or have an interest in farmland, list it in Part 1. | Have an Interest In. | |
| ■ No. | u own or have any legal or equitable interest in any farm- or com Go to Part 7. s. Go to line 47. | nmercial fishing-related property? | |
| Part 7: | Describe All Property You Own or Have an Interest in That You Did No | t List Above | |
| Exam _l ■ No | u have other property of any kind you did not already list? oles: Season tickets, country club membership Give specific information | | |
| 54. Add 1 | the dollar value of all of your entries from Part 7. Write that num | ber here | \$0.00 |
| | | | |

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1 Nicholas Ryan Perry Case number (if known) List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$38,385.00 57. Part 3: Total personal and household items, line 15 \$1,300.00 58. Part 4: Total financial assets, line 36 \$575.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$40,260.00 Copy personal property total \$40,260.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$40,260.00

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|---------------|-----------------------|
| Debtor 1 | Nicholas Ryan Pe | erry | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF CALIFORNIA | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| rait i. | identity the Property Tou Claim as Exempt |
|---------|---|
| | |

Part 1. Identify the Preparty Vey Claim as Exempt

| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | ur spouse is filing with you. | |
|----|---|--------------------------------------|---------|---|------------------------------------|
| | ■ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| | ☐ You are claiming federal exemptions. 11 to | J.S.C. § 522(b)(2) | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | empt, | fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | 2012 Harley Davidson FLHX Street Glide 46,000 miles | \$22,460.00 | | \$10,409.00 | C.C.P. § 703.140(b)(5) |
| | Good Condition Location: 2094 Tenaya Court, Brentwood CA 94513 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 2018 Husqvarna FE 250 Dirt Bike 700 miles | \$9,000.00 | | \$2,215.00 | C.C.P. § 703.140(b)(5) |
| | Very Good Condition Location: 2094 Tenaya Court, Brentwood CA 94513 Line from Schedule A/B: 3.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Household goods and furniture Location: 2094 Tenaya Court, | \$1,000.00 | | \$1,000.00 | C.C.P. § 703.140(b)(3) |
| | Brentwood CA 94513 Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | iPhone Location: 2094 Tenaya Court, | \$200.00 | | \$200.00 | C.C.P. § 703.140(b)(5) |
| | Brentwood CA 94513 | | | 100% of fair market value, up to | |

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Official Form 106C

page 1 of 2

Best Case Bankruptcy

Schedule C: The Property You Claim as Exempt

| De | Nicholas Ryan Perry | | | Case number (if known) | <u></u> |
|----|---|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Clothing and Shoes Location: 2094 Tenaya Court, | \$100.00 | | \$100.00 | C.C.P. § 703.140(b)(3) |
| | Brentwood CA 94513 Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Cash in Wallet Line from Schedule A/B: 16.1 | \$40.00 | | \$40.00 | C.C.P. § 703.140(b)(5) |
| | Ellie Holli Golledale 74 B. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: Bank of the West | \$535.00 | | \$535.00 | C.C.P. § 703.140(b)(5) |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No ☐ Yes. Did you acquire the property cover ☐ No | 3 years after that for ca | ases fi | , | • |
| | ☐ Yes | | | | |

| Fill | in this inform | nation to identify you | ır case: | | | |
|----------------|------------------------------------|---------------------------|---|---------------------------|--|-------------------------------|
| Deb | tor 1 | Nicholas Ryan | Perry Middle Name Last Nam | ne | - | |
| | tor 2 use if, filing) | First Name | Middle Name Last Nam | ne | - | |
| Unit | ed States Bar | nkruptcy Court for the | NORTHERN DISTRICT OF CALIFORN | IA | _ | |
| Cas (if kno | e number | | | | _ | t if this is an ded filing |
| Off | icial Form | 106D | | | | |
| Sc | hedule | D: Creditors | Who Have Claims Secu | red by Propert | :y | 12/15 |
| is ne | | | If two married people are filing together, both a out, number the entries, and attach it to this for | | | |
| | | have claims secured b | y your property? | | | |
| | ☐ No. Check | this box and submit t | his form to the court with your other schedule | es. You have nothing else | to report on this form. | |
| | Yes. Fill in | all of the information | below. | | | |
| Pari | 1: List All | I Secured Claims | | | | |
| | | | more than one secured claim, list the creditor sepa | rately Column A | Column B | Column C |
| for e | ach claim. If mo | ore than one creditor has | s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. | | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | Challenge Services | Financial | Describe the property that secures the claim: | \$12,174.40 | \$6,925.00 | \$5,249.40 |
| | 100 Orange, C | kruptcy t Taft Ave Ste | 2006 GMC Sierra SLE 167,000 miles Good Condition Location: 2094 Tenaya Court, Brentwood CA 94513 As of the date you file, the claim is: Check all th apply. Contingent Unliquidated | | | |
| | | | □ Disputed | | | |
| Who | o owes the del | bt? Check one. | Nature of lien. Check all that apply. | | | |
| | Debtor 1 only Debtor 2 only | | ☐ An agreement you made (such as mortgage car loan) | or secured | | |
| | Debtor 1 and De | • | ☐ Statutory lien (such as tax lien, mechanic's lie | en) | | |
| | | ne debtors and another | Judgment lien from a lawsuit | | | |
| | Check if this cla community del | aim relates to a bt | Other (including a right to offset) Purcha | se Money Security | | |
| | | Opened | | | | |

Official Form 106D

02/19 Last Active

Date debt was incurred 4/23/19

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

page 1 of 2

Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 18 of 47 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

4168

| Debtor 1 Nicholas F | | lana Lan | Ca | ase number (if known) | | |
|---|---|--|--------------------|---------------------------------------|-------------|--------|
| First Name | Middle N | lame Last Name | | | | |
| 2.2 Freedom Road | d Financial | Describe the property that secures | the claim: | \$6,785.00 | \$9,000.00 | \$0.00 |
| Creditor's Name Attn: Bankrupi 10509 Profess | | 2018 Husqvarna FE 250 Dir 700 miles Very Good Condition Location: 2094 Tenaya Cou Brentwood CA 94513 | | | | |
| Circle, Suite 20 Reno, NV 8952 | 02 | As of the date you file, the claim is apply. Contingent | : Check all that | | | |
| Number, Street, City, S | | ☐ Unliquidated | | | | |
| Who owes the debt? C | heck one. | Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | | ☐ An agreement you made (such as car loan) | mortgage or secu | ured | | |
| ☐ Debtor 1 and Debtor 2 ☐ At least one of the deb | | ☐ Statutory lien (such as tax lien, m☐ Judgment lien from a lawsuit | echanic's lien) | | | |
| Check if this claim re community debt | elates to a | Other (including a right to offset) | Purchase M | loney Security | | |
| Date debt was incurred | Opened 01/18 Last Active 4/25/19 | Last 4 digits of account num | nber <u>8531</u> | | | |
| | | | | | | |
| 2.3 Harley Davidso | on | Describe the property that secures | the claim: | \$12,051.00 | \$22,460.00 | \$0.00 |
| Creditor's Name | · | 2012 Harley Davidson FLHZ Glide 46,000 miles Good Condition Location: 2094 Tenaya Cou Brentwood CA 94513 | X Street | | | |
| Attn: Bankrup Po Box 22048 | icy | As of the date you file, the claim is apply. | : Check all that | | | |
| Carson City, N | IV 89721 | Contingent | | | | |
| Number, Street, City, S | • | ☐ Unliquidated☐ Disputed | | | | |
| Who owes the debt? C | heck one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | | ☐ An agreement you made (such as car loan) | s mortgage or secu | ured | | |
| Debtor 1 and Debtor 2 | | ☐ Statutory lien (such as tax lien, m | echanic's lien) | | | |
| At least one of the deb | | Judgment lien from a lawsuit | Durchasa M | lanay Cagurity | | |
| Check if this claim re community debt | elates to a | Other (including a right to offset) | Purchase IVI | loney Security | | |
| Data dalah sura basa da | Opened 06/18 Last Active | Land Authority of Control | nher 9244 | | | |
| Date debt was incurred | 2/11/19 | Last 4 digits of account nun | nber 3444 | | | |
| | | | | | | |
| Add the dollar value of | f your entries in C | Column A on this page. Write that nur | nber here: | \$31,010.4 | 0 | |
| | • | the dollar value totals from all pages | 3. | \$31,010.4 | | |
| Write that number here | p. | | | , , , , , , , , , , , , , , , , , , , | * I | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

| Fill | in this information to ic | lentify your | case: | | | | | | | | |
|---|--|---|---|--|--|--|--|--|--|---------------------------------------|---|
| | | as Ryan Pe | | | | | | | | | |
| DUL | First Name | | | e Name | | Last Name | | | | | |
| Deb | tor 2 | | | | | | | | | | |
| (Spo | use if, filing) First Name | | Middle | e Name | | Last Name | | | | | |
| Unit | ed States Bankruptcy Co | ourt for the: | NORTHE | RN DISTRIC | T OF CAI | LIFORNIA | | | | | |
| Cas | e number | | | | | | | | | Check | if this is an |
| | | | | | | | | | _ | amend | led filing |
| Sc Be as any e Sche Sche left. | hedule E/F: Cre s complete and accurate as executory contracts or une dule G: Executory Contract dule D: Creditors Who Hav Attach the Continuation Pa e and case number (if know | ditors W s possible. Us expired leases ets and Unexp we Claims Secure to this page | e Part 1 for o that could re ired Leases ured by Prop | creditors with esult in a clain (Official Form perty. If more s | PRIORITY n. Also lis 106G). Do space is n | claims and Part 2 of executory contra o not include any c eeded, copy the Pa | cts on Sched reditors with art you need, f | ule A/B: P partially s ill it out, i | roperty (Of ecured clai number the | ficial For ms that a entries in | m 106A/B) and on are listed in n the boxes on the |
| | | vii). | | | | | | | | | |
| Par | 11: List All of Your P | RIORITY Un | secured C | laims | | | | | | | |
| | List All of Your F Do any creditors have price | | | | | | | | | | |
| 1. | | | | | | | | | | | |
| 1. | Do any creditors have pric | | | | | | | | | | |
| 1. | Do any creditors have price ☐ No. Go to Part 2. | ecured claims is. If a claim ha | d claims aga s. If a creditor as both priority er according t | r has more than y and nonpriori | ty amounts name. If y | s, list that claim here ou have more than | and show bot | n priority a | nd nonpriori | ity amoun | ts. As much as |
| 1. | Do any creditors have pric ☐ No. Go to Part 2. ☐ Yes. List all of your priority unsidentify what type of claim it possible, list the claims in al | ority unsecured secured claims is. If a claim ha phabetical orde ditor holds a pa | d claims aga s. If a creditor as both priority er according t articular claim | r has more than y and nonpriori to the creditor's , list the other c | ty amounts name. If your creditors in | s, list that claim here ou have more than Part 3. | and show bot | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun | ts. As much as nuation Page of Nonpriority |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each | ority unsecured secured claims is. If a claim ha phabetical orde ditor holds a pa | d claims aga s. If a creditor as both priority er according t articular claim | r has more than y and nonpriori to the creditor's , list the other o | ty amounts name. If y creditors in orm in the i | s, list that claim here ou have more than Part 3. Instruction booklet.) | and show bot wo priority uns | n priority a secured cla | nd nonpriori aims, fill out | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each EDD Priority Creditor's Name C/O Bankruptcy (PO Box 826880) | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC | d claims aga s. If a creditor as both priority er according to articular claim see the instruct | r has more than y and nonpriori to the creditor's , list the other c | ty amounts name. If y creditors in orm in the i | t number | and show bot wo priority uns | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun | ts. As much as nuation Page of Nonpriority |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each EDD Priority Creditor's Name C/O Bankruptcy (PO Box 826880 Sacramento, CA) | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC | d claims aga s. If a creditor as both priority er according to articular claim see the instruct | r has more than y and nonpriori to the creditor's , list the other cotions for this for Last 4 digits. | ty amounts name. If yor creditors in orm in the in of accounts e debt inco | s, list that claim here ou have more than Part 3. instruction booklet.) t number urred? | and show bot wo priority uns | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each EDD Priority Creditor's Name C/O Bankruptcy (PO Box 826880) | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC 94280 te Zip Code | d claims aga s. If a creditor as both priority er according to articular claim see the instruct | r has more than y and nonpriori to the creditor's , list the other ctions for this for the tast 4 digits. When was the As of the date | ty amounts name. If your creditors in form in the in of accounts e debt incounts e you file, | t number | and show bot wo priority uns | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each EDD Priority Creditor's Name C/O Bankruptcy of PO Box 826880 Sacramento, CA Number Street City Sta | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC 94280 te Zip Code | d claims aga s. If a creditor as both priority er according to articular claim see the instruct | r has more than y and nonpriori to the creditor's , list the other ctions for this for Last 4 digits. When was the As of the date | ty amounts name. If your creditors in orm in the i of accoun- e debt incounts e you file, t | s, list that claim here ou have more than Part 3. instruction booklet.) t number urred? | and show bot wo priority uns | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each EDD Priority Creditor's Name C/O Bankruptcy (PO Box 826880 Sacramento, CA Number Street City State Who incurred the debt? (Incurred the debt?) | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC 94280 te Zip Code | d claims aga s. If a creditor as both priority er according to articular claim see the instruct | r has more than y and nonpriorito the creditor's , list the other cotions for this for the was the when was the As of the date Contingent Unliquidate | ty amounts name. If your creditors in orm in the i of accoun- e debt incounts e you file, t | s, list that claim here ou have more than Part 3. instruction booklet.) t number urred? | and show bot wo priority uns | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each) EDD Priority Creditor's Name C/O Bankruptcy (PO Box 826880 Sacramento, CA) Number Street City Sta Who incurred the debt? (In the priority Could be seen to see the priority Creditor's Name C/O Bankruptcy (PO Box 826880 Sacramento, CA) Debtor 1 only | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC 94280 te Zip Code Check one. | d claims aga s. If a creditor as both priority er according to articular claim see the instruct | r has more than y and nonpriori to the creditor's , list the other ctions for this for Last 4 digits. When was the As of the date | ty amounts name. If your continue in the incomment of accounts e debt incomment in the inco | s, list that claim here ou have more than i Part 3. instruction booklet.) t number urred? the claim is: Check | and show bot wo priority uns | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each) EDD Priority Creditor's Name C/O Bankruptcy of PO Box 826880 Sacramento, CA Number Street City State Who incurred the debt? (In the property of the priority Creditor's Name C/O Bankruptcy of Debtor 1 only Debtor 1 only Debtor 2 only | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC 94280 te Zip Code Check one. | s. If a creditor as both priority according to the instruction of the | r has more than y and nonpriorito the creditor's , list the other octions for this for Last 4 digits. When was the Contingent Unliquidate Disputed | ty amounts name. If y creditors in orm in the i of account e debt ince e you file, t ed | s, list that claim here ou have more than i Part 3. instruction booklet.) t number urred? the claim is: Checker ecured claim: | and show bot wo priority uns | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in al Part 1. If more than one credit (For an explanation of each) EDD Priority Creditor's Name C/O Bankruptcy PO Box 826880 Sacramento, CA Number Street City Sta Who incurred the debt? (In the context of the | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC 94280 te Zip Code Check one. | d claims aga s. If a creditor as both priority er according t articular claim see the instruct 92E | r has more than y and nonpriorito the creditor's , list the other ctions for this for the was the when was the Contingent Unliquidate Unliquidate Type of PRIO | ty amounts name. If your continue in the incomment of accounts e debt incomment in the inco | s, list that claim here ou have more than Part 3. Instruction booklet.) t number urred? the claim is: Checker ecured claim: igations | Total clair | n priority a secured cla | nd nonpriori aims, fill out Priority | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |
| 1. | Do any creditors have price No. Go to Part 2. Yes. List all of your priority unsidentify what type of claim it possible, list the claims in all Part 1. If more than one credit (For an explanation of each) EDD Priority Creditor's Name C/O Bankruptcy of PO Box 826880 Sacramento, CA Number Street City State Who incurred the debt? (In the property of the priority Creditor's Name C/O Bankruptcy of Debtor 1 only Debtor 1 only Debtor 2 only | secured claims is. If a claim ha phabetical orde ditor holds a pa type of claim, s Group MIC 94280 te Zip Code Check one. | d claims aga s. If a creditor as both priority er according t articular claim see the instruct 92E | r has more than y and nonpriorito the creditor's , list the other octions for this form. Last 4 digits when was the Contingent Unliquidate Unliquidate Type of PRIO Domestic services and Taxes and | ty amounts name. If your continue in the incomment of accounts a debt inco | s, list that claim here ou have more than i Part 3. instruction booklet.) t number urred? the claim is: Checker ecured claim: | Total clair a all that apply | n priority a ecured cla | nd nonpriori aims, fill out Priority | ity amoun the Contii | ts. As much as nuation Page of Nonpriority amount |

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

☐ Yes

Page 1 of 5

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com 52072 Best Case Bankruptcy Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 20 of 47

Notice Only

Debtor 1 Nicholas Ryan Perry Case number (if known) 2.2 Franchise Tax Board Last 4 digits of account number \$0.00 \$0.00 \$0.00 Priority Creditor's Name PO Box 942867 When was the debt incurred? Sacramento, CA 94267 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ■ Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt lacksquare Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes **Notice Only** 2.3 **Internal Revenue Service** Last 4 digits of account number \$0.00 \$0.00 Priority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt ■ Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify ☐ Yes **Notice Only** 2.4 State Board of Equalization Last 4 digits of account number \$0.00 \$0.00 Priority Creditor's Name P.O. Box 942879 When was the debt incurred? Sacramento, CA 94279 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code

\$0.00 \$0.00 Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes **Notice Only**

Official Form 106 E/F Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Nicholas Ryan Perry Case number (if known) 2.5 **U.S. Attorney General** Last 4 digits of account number \$0.00 \$0.00 \$0.00 Priority Creditor's Name Civil Trial Sec. Western When was the debt incurred? PO Box 683 Ben Franklin Washington, DC 20044 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other, Specify ☐ Yes **Notice Only** 2.6 **United States Attorney's Office** \$0.00 \$0.00 Last 4 digits of account number \$0.00 Priority Creditor's Name When was the debt incurred? Attn: Chief Tax Division 450 Golden Gate Ave. 10th San Francisco, CA 94102 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes **Notice Only** Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Official Form 106 E/F Schedul
Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Schedule E/F: Creditors Who Have Unsecured Claims

Page 22 of 47

| Nlama | ital One | | Last 4 digits of account number | 3599 | | \$715 |
|--|--|--|--|--|--|--|
| | n: Bankr | ditor's Name | | Oper | ned 12/15 Last Active | |
| | Box 302 | | When was the debt incurred? | 5/09/ | | |
| | | ity, UT 84130 | | | | _ |
| | | City State Zip Code | As of the date you file, the claim i | s: Check | all that apply | |
| _ | | he debt? Check one. | | | | |
| ■ D | ebtor 1 onl | у | ☐ Contingent | | | |
| | ebtor 2 onl | у | ☐ Unliquidated | | | |
| □ D | ebtor 1 and | d Debtor 2 only | ☐ Disputed | | | |
| ☐ Af | t least one | of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| □с | heck if this | s claim is for a community | ☐ Student loans | | | |
| debt Is the | | bject to offset? | Obligations arising out of a sepa report as priority claims | ration ag | reement or divorce that you did not | |
| ■ N | lo | | Debts to pension or profit-sharin | g plans, | and other similar debts | |
| □ Ye | - | | Other Specify Credit Card | - · | | |
| | | | Other. Specify | | | _ |
| | dit One | | Last 4 digits of account number | 8151 | | \$622 |
| | • | ditor's Name uptcy Department | | Oper | ned 10/17 Last Active | |
| | Box 988 | | When was the debt incurred? | 3/25/ | | |
| | | NV 89193 | | | | _ |
| | | City State Zip Code | As of the date you file, the claim i | s: Check | all that apply | |
| | | he debt? Check one. | | | | |
| ■ D | ebtor 1 onl | у | ☐ Contingent | | | |
| □ D | ebtor 2 onl | у | ☐ Unliquidated | | | |
| □ D | ebtor 1 and | d Debtor 2 only | ☐ Disputed | | | |
| ☐ Af | t least one | of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| □с | heck if this | s claim is for a community | ☐ Student loans | | | |
| debt | | bject to offset? | Obligations arising out of a sepa report as priority claims | ration ag | reement or divorce that you did not | |
| | e claim sul | ojoot to onloot. | | | | |
| | | 5,000 10 0110011 | Debts to pension or profit-sharin | g plans, | and other similar debts | |
| Is the | lo | | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card | | and other similar debts | _ |
| Is the | ist Others ge only if y collect fro than one c any debts | s to Be Notified About a Debt rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or | Other. Specify Credit Card That You Already Listed out your bankruptcy, for a debt that you listed in Parts 1 or 2, list the additional submit this page. | ou alrea Parts 1 | dy listed in Parts 1 or 2. For exam or 2, then list the collection agenc | y here. Similarly, if y |
| Is the N Y (3: Li ethis pagerying to a verying to a ver | ist Others ge only if y collect fro than one c any debts | s to Be Notified About a Debt rou have others to be notified about a debt you owe to some treditor for any of the debts that you not fill out or a mounts for Each Type of Uns | Other. Specify Credit Card That You Already Listed out your bankruptcy, for a debt that y become else, list the original creditor in you listed in Parts 1 or 2, list the addissubmit this page. | ou alrea Parts 1 tional cr | dy listed in Parts 1 or 2. For exam or 2, then list the collection agend editors here. If you do not have ac | by here. Similarly, if you |
| Is the No. | ist Others ge only if y collect fro than one c any debts | s to Be Notified About a Debt rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or mounts for Each Type of Uns certain types of unsecured claim | Other. Specify Credit Card That You Already Listed out your bankruptcy, for a debt that you listed in Parts 1 or 2, list the additional submit this page. | ou alrea Parts 1 tional cr | dy listed in Parts 1 or 2. For exam or 2, then list the collection agend editors here. If you do not have ac | ey here. Similarly, if yo Iditional persons to b |
| Is the No. | ist Others ge only if y collect fro than one c any debts dd the Ar nounts of | s to Be Notified About a Debt rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or mounts for Each Type of Uns certain types of unsecured claim | Other. Specify Credit Card That You Already Listed out your bankruptcy, for a debt that y become else, list the original creditor in you listed in Parts 1 or 2, list the addissubmit this page. | ou alrea Parts 1 tional cr | dy listed in Parts 1 or 2. For exam or 2, then list the collection agend editors here. If you do not have ac | by here. Similarly, if you distinct you have a series of being the |
| Is the No. 1 Your State of this page rying to over more to iffed for 14: Act all the and 14: Act all the act all t | ist Others ge only if y collect fro than one c any debts dd the Ar nounts of | s to Be Notified About a Debt rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or mounts for Each Type of Uns certain types of unsecured claim | Other. Specify Credit Card That You Already Listed out your bankruptcy, for a debt that y become else, list the original creditor in you listed in Parts 1 or 2, list the addissubmit this page. | ou alrea Parts 1 tional cr | dy listed in Parts 1 or 2. For exam or 2, then list the collection agend editors here. If you do not have ac purposes only. 28 U.S.C. §159. Ac | by here. Similarly, if you diditional persons to be diditional persons to be did the amounts for ea |
| Is the N Y | ist Others ge only if y collect fro than one c any debts dd the Ar mounts of ecured cla | s to Be Notified About a Debt you have others to be notified about you owe to som myou for a debt you owe to som reditor for any of the debts that you in Parts 1 or 2, do not fill out or a mounts for Each Type of Uns certain types of unsecured claim im. | Other. Specify Credit Card That You Already Listed out your bankruptcy, for a debt that y become else, list the original creditor in you listed in Parts 1 or 2, list the addissubmit this page. | ou alrea Parts 1 tional cr | dy listed in Parts 1 or 2. For exam or 2, then list the collection agend editors here. If you do not have ac purposes only. 28 U.S.C. §159. Ac | by here. Similarly, if you diditional persons to be diditional persons to be did the amounts for ea |
| Is the No. | ist Others ge only if y collect fro than one c any debts dd the Ar mounts of ecured cla | s to Be Notified About a Debt rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or mounts for Each Type of Uns certain types of unsecured claim im. | Other. Specify Credit Card That You Already Listed Out your bankruptcy, for a debt that y leone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page. Recured Claim Is. This information is for statistical re | ou alrea Parts 1 tional cr eporting | dy listed in Parts 1 or 2. For exam or 2, then list the collection agence editors here. If you do not have accompurposes only. 28 U.S.C. §159. Accompute the collection of the | dditional persons to be the difference of the di |
| Is the No. 1 | ist Others ge only if y collect fro than one c any debts dd the Ar mounts of ecured cla | s to Be Notified About a Debt you have others to be notified about you owe to som myou for a debt you owe to som reditor for any of the debts that you in Parts 1 or 2, do not fill out or a mounts for Each Type of Uns certain types of unsecured claim im. | Other. Specify Credit Card That You Already Listed Out your bankruptcy, for a debt that y leone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page. Recured Claim Is. This information is for statistical re | ou alrea Parts 1 tional cr | dy listed in Parts 1 or 2. For exam or 2, then list the collection agence editors here. If you do not have acceptable or the second of the sec | by here. Similarly, if you diditional persons to be diditional persons to be did the amounts for ea |
| Is the No. | ist Others ge only if y collect fro than one c any debts dd the Ar mounts of e ecured cla 6a. | s to Be Notified About a Debt rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or mounts for Each Type of Uns certain types of unsecured claim im. Domestic support obligations Taxes and certain other debts y Claims for death or personal in | Other. Specify Credit Card That You Already Listed Out your bankruptcy, for a debt that y leone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page. Recured Claim Is. This information is for statistical re | ou alrea Parts 1 tional cr eporting 6a. 6b. | dy listed in Parts 1 or 2. For exam or 2, then list the collection agence editors here. If you do not have accompurposes only. 28 U.S.C. §159. Accompute the collection of the | by here. Similarly, if you diditional persons to be diditional persons to be did the amounts for early |
| Is the No. | ist Others ge only if y collect fro than one c any debts dd the Ar mounts of e ecured cla 6a. 6b. 6c. | s to Be Notified About a Debt rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or mounts for Each Type of Uns certain types of unsecured claim im. Domestic support obligations Taxes and certain other debts y Claims for death or personal in | Other. Specify That You Already Listed out your bankruptcy, for a debt that y become else, list the original creditor in you listed in Parts 1 or 2, list the additional submit this page. Decured Claim Is. This information is for statistical recovery of the property | ou alrea Parts 1 tional cr eporting 6a. 6b. 6c. | dy listed in Parts 1 or 2. For exam or 2, then list the collection agence editors here. If you do not have acceptable of the collection agence of the collection agence editors here. If you do not have acceptable of the collection of the collection agence of the collectio | by here. Similarly, if you diditional persons to be diditional persons to be did the amounts for early and the amounts for |
| Is the No. | ist Others ge only if y collect froi than one c any debts dd the Ar mounts of ecured cla 6a. 6b. 6c. 6d. | s to Be Notified About a Debt you have others to be notified about a Debt wou have others to be notified about a Debt reditor for any of the debts that y in Parts 1 or 2, do not fill out or a mounts for Each Type of Uns certain types of unsecured claim im. Domestic support obligations Taxes and certain other debts y Claims for death or personal in Other. Add all other priority unsec | Other. Specify That You Already Listed out your bankruptcy, for a debt that y become else, list the original creditor in you listed in Parts 1 or 2, list the additional submit this page. Decured Claim Is. This information is for statistical recovery of the property | ou alrea Parts 1 tional cr | dy listed in Parts 1 or 2. For exam or 2, then list the collection agence editors here. If you do not have acceptable of the collection agence of | by here. Similarly, if you diditional persons to be diditional persons to be did the amounts for early and the amounts for |
| Is the No. | ist Others ge only if y collect froi than one c any debts dd the Ar mounts of ecured cla 6a. 6b. 6c. 6d. | s to Be Notified About a Debt you have others to be notified about a Debt wou have others to be notified about a Debt reditor for any of the debts that y in Parts 1 or 2, do not fill out or a mounts for Each Type of Uns certain types of unsecured claim im. Domestic support obligations Taxes and certain other debts y Claims for death or personal in Other. Add all other priority unsec | Other. Specify That You Already Listed out your bankruptcy, for a debt that y become else, list the original creditor in you listed in Parts 1 or 2, list the additional submit this page. Decured Claim Is. This information is for statistical recovery of the property | ou alrea Parts 1 tional cr | dy listed in Parts 1 or 2. For exam or 2, then list the collection agence editors here. If you do not have acceptable of the second of the sec | cy here. Similarly, if you diditional persons to be diditional persons to be did the amounts for early. |
| Is the Ni | ist Others ge only if y collect fro than one c any debts dd the Ar mounts of ecured cla 6a. 6b. 6c. 6d. | s to Be Notified About a Debt rou have others to be notified ab m you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or a mounts for Each Type of Uns certain types of unsecured claim im. Domestic support obligations Taxes and certain other debts y Claims for death or personal in Other. Add all other priority unsec | Other. Specify That You Already Listed out your bankruptcy, for a debt that y become else, list the original creditor in you listed in Parts 1 or 2, list the additional submit this page. Decured Claim Is. This information is for statistical recovery of the property | ou alrea Parts 1 tional cr eporting 6a. 6b. 6c. 6d. | dy listed in Parts 1 or 2. For exam or 2, then list the collection agence editors here. If you do not have acceptable of the collection agence of | cy here. Similarly, if you diditional persons to be diditional persons to be did the amounts for early. |
| Is the N/ | ist Others ge only if y collect fro than one c any debts dd the Ar mounts of ecured cla 6a. 6b. 6c. 6d. | s to Be Notified About a Debt you have others to be notified about you for a debt you owe to som reditor for any of the debts that y in Parts 1 or 2, do not fill out or second to the s | That You Already Listed out your bankruptcy, for a debt that y leone else, list the original creditor in you listed in Parts 1 or 2, list the addissubmit this page. Becured Claim Is. This information is for statistical recovery of the property of the pr | ou alrea Parts 1 tional cr eporting 6a. 6b. 6c. 6d. | dy listed in Parts 1 or 2. For exam or 2, then list the collection agence editors here. If you do not have acceptable of the second of the sec | by here. Similarly, if you diditional persons to be did the amounts for early and the amounts fo |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total Nonpriority. Add lines 6f through 6i.

| | 0.00 |
|-----|----------------|
| 6i. | \$ 1,337.00 |

6j. \$ **1,337.00**

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 5
Best Case Bankruptcy

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 24 of 47

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|---------------|------------------------------------|
| Debtor 1 | Nicholas Ryan Pe | erry | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF CALIFORNIA | |
| Case number | | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have th r, Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | - | | | | |
| | Name | | | | |
| | Number | Street | | | <u></u> |
| | City | | State | ZIP Code | _ |

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

| Fill in thi | s information to | identify your | case: | | | |
|----------------|-----------------------------------|--------------------------------|--|--------------------------|---|--|
| Debtor 1 | | olas Ryan Pe | | | | |
| Debtor 2 | First Nan | ne | Middle Name | Last Name | | |
| (Spouse if, fi | iling) First Nan | ne | Middle Name | Last Name | | |
| United St | ates Bankruptcy C | Court for the: | NORTHERN DISTRICT OF | CALIFORNIA | | |
| Case nun | nber | | | | | |
| (if known) | | | | | | Check if this is an amended filing |
| Officia | al Form 10 | 6H | | | | |
| | dule H: Yo | | ebtors | | | 12/15 |
| | | | | | | |
| people are | e filing together, and number the | both are equ entries in the | ally responsible for supplying | ng correct information | on. If more space is n | ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write |
| 1. Do | you have any co | odebtors? (If | you are filing a joint case, do i | not list either spouse a | as a codebtor. | |
| ■ No |) | | | | | |
| ☐ Ye | es | | | | | |
| | | | lived in a community property Nevada, New Mexico, Puerto | | | y states and territories include |
| _ | | ., | | | , | |
| | o. Go to line 3. | | | | | |
| ■ Ye | es. Did your spous | e, former spou | use, or legal equivalent live wi | th you at the time? | | |
| | ■ No | | | | | |
| | ☐ Yes. | | | | | |
| | | | | | - 20 : 4 | |
| | In which co | - | e or territory did you live? | California | Fill in the name a | nd current address of that person. |
| | Name of your | spouse, former sp | ouse, or legal equivalent | | | |
| | Number, Stree | et, City, State & Zip | Code | | | |
| | | | | | | g with you. List the person shown |
| | | | | | | he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil |
| out C | Column 2. | | | | | |
| | Column 1: Your | | P Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt |
| | Name, Namber, Orices | , Only, Otalio and El | . 0000 | | Check all scriedule | ээ шагарру. |
| 3.1 | | | | | ☐ Schedule D, lin | |
| | Name | | | | ☐ Schedule E/F, I | |
| | | | | | ☐ Schedule G, lin | ne |
| | | treet | 01-1- | 710.0-1- | • | |
| | City | | State | ZIP Code | | |
| | | | | | По | |
| 3.2 | Name | | | | ☐ Schedule D, lin | |
| | | | | | ☐ Schedule E/F, I☐ Schedule G, Iin | |
| | Number S | treet | | | - 201104410 0, 1111 | |
| | City | treet | State | ZIP Code | | |

Official Form 106H Schedule H: Your Codebtors Pag Sept Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 26 of 47 Page 1 of 1
Best Case Bankruptcy

| | in this information to identify your optor 1 Nicholas Ry | | | | | | | | | |
|-------------|--|---|----------------------------------|------------|------|-------------|-----------------------|---------------------------------|----------------------------------|----------|
| _ | otor 2 | | | | _ | | | | | |
| | ted States Bankruptcy Court for the | e: NORTHERN DISTRIC | CT OF CALIFORNIA | | | | | | | |
| | se number nown) | | - | | | □ A | | ed filing ent showin | g postpetition ollowing date: | |
| 0 | fficial Form 106I | | | | | Ī | 1M / DD/ \ | YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment Fill in your employment information. | ur spouse is not filing w On the top of any additi | ith you, do not inclu | ıde infor | mati | on about | your spe umber (if | ouse. If mo known). <i>A</i> | ore space is | needed, |
| | | | ■ Employed | | | | ☐ Empl | | g openee | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ☐ Not employed | _ | | | | mployed | | |
| | employers. | Occupation | Carpenter | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | RFJ Meiswinke | I, Co | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 930 Innes Aven San Francisco, | | 24 | | | | | |
| | | How long employed t | here? June 1 | 0, 2019 | | | _ | | | |
| Par | t 2: Give Details About Mo | nthly Income | | | | | | | | |
| | mate monthly income as of the cuse unless you are separated. | late you file this form. If | you have nothing to ı | eport for | any | line, write | e \$0 in the | space. In | clude your no | n-filing |
| | u or your non-filing spouse have m e space, attach a separate sheet to | | ombine the informatio | on for all | empl | oyers for | that perso | on on the li | nes below. If | you need |
| | | | | | | For Del | otor 1 | | btor 2 or ng spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 5 | ,282.29 | \$ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add li | ne 2 + line 3. | | 4. | \$ | 5,28 | 32.29 | \$ | N/A | |

| Copy line 4 here | | | | | | For | Debtor 1 | | Debtor 2 or -filing spouse | |
|--|-----|------------------------------------|---|---|---------|-----|---------------|-------|--|---|
| 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for testirement fund fund for fund fund fund fund fund fund fund fund | | Сору | line 4 here | | 4. | \$ | 5,282.29 | | | |
| 55. Mandatory contributions for retirement plans 56. Voluntary contributions for retirement plans 56. Voluntary contributions for retirement plans 56. Required repayments of retirement fund loans 56. Required repayments of retirement fund loans 56. Domestic support obligations 57. Other deaductions. Specify: 58. 0.000 \$ N/A 59. Union dues 59. \$ 0.000 \$ N/A 59. Union dues 59. \$ 0.000 \$ N/A 59. Union dues 59. \$ 0.000 \$ N/A 59. Other deductions. Specify: 60. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,690,30 \$ N/A 61. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,690,30 \$ N/A 62. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,591.99 \$ N/A 63. Not income from rental property and from operating a business, profession, or farm 64. Not income from rental property and business showing gross 65. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 68. Calculate total dead alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 68. Social Security 69. \$ 0.000 \$ N/A 69. Social Security 60. Social Security 60. Social Security 60. Social Security 61. Other government assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 61. \$ 0.000 \$ N/A 61. Social Security 62. \$ 0.000 \$ N/A 63. Pension or retirement income 64. \$ 0.000 \$ N/A 65. Social Security 65. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an urmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 65. Do not include any amourns already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an urmarried partner, members of your household, your dependent | 5. | List a | all payroll deduct | tions: | | | | | | |
| 56. Mandatory contributions for retirement plans 56. Voluntary contributions for retirement plans 56. Voluntary contributions for retirement plans 56. Required repayments of retirement fund loans 56. Required repayments of retirement fund loans 56. So. Domestic support obligations 56. Insurance 56. So. Domestic support obligations 57. Other deductions. Specify: 58. Union duse 59. Voluntary of the state of | | 5a. | Tax, Medicare, | and Social Security deductions | 5a. | \$ | 1,690.30 | \$ | N/A | |
| 5c. Voluntary contributions for retirement plans 5c. 8 0.00 \$ N/A 5c. Required repayments of retirement fund loans 5c. 8 0.00 \$ N/A 5c. Insurance 5c. \$ 0.00 \$ N/A 5c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5g+5g+5h. 6. \$ 1,690.30 \$ N/A 5c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5g+5g+5h. 6. \$ 1,690.30 \$ N/A 5c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5g+5g+5h. 6. \$ 1,690.30 \$ N/A 5c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5g+5g+5h. 6. \$ 1,690.30 \$ N/A 5c. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,591.99 \$ N/A 5c. Insurance 5c. \$ 1,590.30 \$ N/A 5c. Insurance 5c. \$ 0.00 \$ N/A 5c. Family support payments that you, a non-filing spouse, or a dependent regularly receive 5c. \$ 0.00 \$ N/A 5c. Family support payments that you, a non-filing spouse, or a dependent regularly receive 5c. \$ 0.00 \$ N/A 5c. Family support payments that you, a non-filing spouse, or a dependent regularly receive 5c. \$ 0.00 \$ N/A 5c. Social Security 5c. \$ 0.00 \$ N/A 5c. Social Security 5c. \$ 0.00 \$ N/A 5c. Social Security 5c. \$ 0.00 \$ N/A 5c. \$ 0.00 \$ N/A 5c. Social Security 5c. \$ 0.00 \$ N/A 5c. So | | 5b. | Mandatory cont | tributions for retirement plans | 5b. | \$ | | \$ | N/A | |
| 55. Required repayments of retirement fund loans 56. Insurance 56. S 0.00 \$ N/A 56. Domestic support obligations 57. Domestic support obligations 58. S 0.00 \$ N/A 59. Union dues 59. Union due duductions. Add lines 5a+5b+5c+5d+5e+5d+5e+5d+5g+5h. 6. \$ 1,690.30 \$ N/A 59. Union from rental property and from operating a business, profession, or farm 59. Value and a list at lother income regularly receive 59. N/A 59. Union from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly nel income. 59. N/A 59. Union from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly nel income. 59. N/A 59. Union from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly nel income. 59. N/A 59. Value due due due due due due due due due d | | 5c. | Voluntary contr | ributions for retirement plans | 5c. | \$ | | \$ | | |
| 55. Domestic support obligations 59. Union dues 59. 0.00 \$ N/A 50. Other deductions. Specify: 50. 0.00 \$ N/A 50. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,690.30 \$ N/A Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,591.99 \$ N/A List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and the total monthly receives. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8e. \$ 0.00 \$ N/A 8d. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the volue (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8h. Other monthly income. Specify: 9h. Add all other income. Add lines 8a+8b+8c+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Specify: 9h. Add all other income. Add lines 7 + line 9. Add the entities in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 2 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined mont | | 5d. | Required repay | ments of retirement fund loans | 5d. | \$ | 0.00 | \$ | | |
| 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,690.30 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,591.99 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property selflement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8pecify: 8p. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add lines 8a-8b-8c-8d-8e-8f-8g+8h, 9. \$ 0.00 \$ N/A 11. + \$ 0.00 12. Add the emunt in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income. No. | | 5e. | Insurance | | 5e. | \$ | 0.00 | \$ | N/A | |
| 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,690.30 \$ N/A 7. \$ 3,591.99 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property selfement. 8c. Social Security 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Social Security 8f. \$ 0.00 \$ N/A 8f. \$ 0.00 \$ N/A 8g. \$ 0.00 \$ N/A 8h. \$ | | 5f. | Domestic supp | ort obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Add all other income payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, lift it applies Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Add the amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, lift it applies | | 5g. | Union dues | | 5g. | \$ | 0.00 | \$ | N/A | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,591.99 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. \$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 3,591.99 Combined monthly income. | | 5h. | Other deduction | ns. Specify: | 5h.+ | \$ | 0.00 | + \$ | N/A | |
| 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. \$ 0.00 \$ N/A 8e. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. * \$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. * \$ 3,591.99** Combined monthly income. No. | 6. | Add 1 | the payroll dedu | ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 1,690.30 | \$ | N/A | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 3,591.99 No. | 7. | Calcu | ulate total month | lly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 3,591.99 | \$ | N/A | |
| 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | 8. | | Net income from profession, or f Attach a statement receipts, ordinary | m rental property and from operating a business, farm ent for each property and business showing gross y and necessary business expenses, and the total | 8a. | \$ | 0.00 | \$ | N/Δ | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 3,591.99 Combined monthly income. | | 8b. | • | | | · - | | | | |
| 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | | Family support regularly received Include alimony, | payments that you, a non-filing spouse, or a dependent e spousal support, child support, maintenance, divorce | t | \$ | | \$ | | |
| 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 3,591.99 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? | | 8d. | | | | \$ | | | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? | | | | • | | · · | | · · — | | |
| 8h. Other monthly income. Specify: 8h.+ \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income No. | | 8f. | Include cash ass that you receive, Nutrition Assista Specify: | sistance and the value (if known) of any non-cash assistance, such as food stamps (benefits under the Supplemental nce Program) or housing subsidies. | 8f. | | 0.00 | | N/A | |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income No. | | 8g. | Pension or retir | rement income | 8g. | \$ | | · - | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? | | 8h. | Other monthly i | income. Specify: | 8h.+ | \$ | 0.00 | + \$ | N/A | |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. | 9. | Adda | all other income. | . Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. | 10. | Calcu | ulate monthly inc | come. Add line 7 + line 9. | 10. \$ | 3 | 3.591.99 + \$ | | N/A = \$ | 3.591.99 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 3,591.99 Combined monthly income No. | | | • | | | | - | | - | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{3,591.99}{Combined monthly income}} 13. Do you expect an increase or decrease within the year after you file this form? No. | 11. | State Include other Do no | e all other regular de contributions fr friends or relative of include any amo | r contributions to the expenses that you list in Schedule om an unmarried partner, members of your household, you es. | r depen | | | | | 0.00 |
| 13. Do you expect an increase or decrease within the year after you file this form? No | 12. | Write | that amount on the | | | | | | | 3,591.99 |
| 13. Do you expect an increase or decrease within the year after you file this form? No. | | | | | | | | | | |
| ☐ Yes. Explain: | 13. | Do yo | • | rease or decrease within the year after you file this form | n? | | | | monding | , income |
| | | | Yes. Explain: | | | | | | | |

| Fill | in this inform | ation to identify ye | our case: | | | | | |
|--------------------|--|---|----------------------------|---|-----------------------|---------------|--------------------------------------|---|
| | otor 1 | Nicholas Ry | | | | | k if this is: An amended filing | |
| | otor 2 ouse, if filing) | | | | | _ | A supplement shown 13 expenses as of | ving postpetition chapter the following date: |
| Unit | ed States Bank | kruptcy Court for the | : NORTH | IERN DISTRICT OF CALIF | FORNIA | _ T | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| O | fficial Fo | orm 106J | | | | | | |
| S | chedule | J: Your | Exper | ises | | | | 12/15 |
| info nur Par | ormation. If removed the second terms of the s | nore space is ne wn). Answer eve cribe Your House | eeded, atta ry question | If two married people arch another sheet to this for. | | | | |
| 1. | Is this a joi | | | | | | | |
| | | es Debtor 2 live | in a separ | ate household? | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expen</i> ses | for Separate House | ehold of Debt | or 2. | |
| 2. | Do you hav | ve dependents? | ■ No | | | | | |
| | Do not list [Debtor 2. | Debtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | | | | □ No |
| | dependents | s names. | | | | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | expenses (| spenses include of people other t nd your depende | than 🗂 | No Yes | | | | |
| | | nate Your Ongoi | | | | | | |
| exp | | a date after the | | uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | ch assistance an | | government assistance if cluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| 4. | | or home owners and any rent for th | | ses for your residence. In r lot. | nclude first mortgage | e 4. \$ | | 1,800.00 |
| | If not inclu | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | | 0.00 |
| | | erty, homeowner' | | | | 4b. \$ | | 40.00 |
| | | | • | ipkeep expenses | | 4c. \$ | | 0.00 |
| | 4d. Hom | eowner's associa | tion or cond | dominium dues | | 4d. \$ | | 0.00 |

Official Form 106J Schedule J: Your Expenses

Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 29 of 47

5. Additional mortgage payments for your residence, such as home equity loans

| Debtor 1 | Nicholas Ryan Perry | Case num | ber (if known) | |
|--------------|--|----------------------|-----------------|--------------------------------|
| 6. Uti | lities: | | | |
| 6a. | | 6a. | \$ | 200.00 |
| 6b. | | 6b. | \$ | 60.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 0.00 |
| 6d. | Other. Specify: Cell Phone | 6d. | \$ | 184.00 |
| Fo | od and housekeeping supplies | | \$ | 400.00 |
| | ildcare and children's education costs | 8. | | 0.00 |
| Clo | othing, laundry, and dry cleaning | 9. | · | 50.00 |
| | rsonal care products and services | 10. | | 50.00 |
| | dical and dental expenses | 11. | | 0.00 |
| | insportation. Include gas, maintenance, bus or train fare. | | | |
| | not include car payments. | 12. | \$ | 460.00 |
| | tertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 20.00 |
| . Ch | aritable contributions and religious donations | 14. | \$ | 100.00 |
| . Ins | urance. | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15 | a. Life insurance | 15a. | | 0.00 |
| 15l | o. Health insurance | 15b. | | 0.00 |
| 150 | c. Vehicle insurance | 15c. | | 220.00 |
| 150 | d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| | (es. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | ecify: | 16. | \$ | 0.00 |
| | tallment or lease payments: | | _ | |
| | a. Car payments for Vehicle 1 | 17a. | · - | 188.41 |
| | c. Car payments for Vehicle 2 | 17b. | · - | 0.00 |
| | c. Other. Specify: | 17c. | | 0.00 |
| | d. Other. Specify: | 17d. | \$ | 0.00 |
| | ur payments of alimony, maintenance, and support that you did not report | | ¢ | 0.00 |
| | ducted from your pay on line 5, Schedule I, Your Income (Official Form 106) |). 18. | · · | |
| | ner payments you make to support others who do not live with you. | 40 | \$ | 0.00 |
| | ecify: her real property expenses not included in lines 4 or 5 of this form or on <i>Sc</i> | 19. | Income | |
| | a. Mortgages on other property | nedule 1: 40 20a. | | 0.00 |
| | o. Real estate taxes | 20a. 20b. | | 0.00 |
| | | 20b. 20c. | · | |
| | c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses | 20d. 20d. | | 0.00 |
| | | | | 0.00 |
| | e. Homeowner's association or condominium dues | 20e. | · · | 0.00 |
| | ner: Specify: Birthdays/Haircuts/Holiday | 21. | · <u> </u> | 10.00 |
| _ | hicle Registration | | +\$ | 25.00 |
| | hicle Maintenance | | +\$ | 15.00 |
| Gy | m Membership | | +\$ | 72.00 |
| 2. Ca | culate your monthly expenses | | | |
| | a. Add lines 4 through 21. | | \$ | 3,894.41 |
| | b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | > | \$ | 3,034.41 |
| | | _ | \$ ——— | 2 224 44 |
| 220 | c. Add line 22a and 22b. The result is your monthly expenses. | | Φ | 3,894.41 |
| 3. Ca | culate your monthly net income. | | | |
| 238 | a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,591.99 |
| | o. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 3,894.41 |
| | | | | 7 |
| 230 | c. Subtract your monthly expenses from your monthly income. | | | 200.40 |
| | The result is your monthly net income. | 23c. | \$ | -302.42 |
| | | | | |
| | you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect you | | | rease or decrease bocause of a |
| | example, do you expect to finish paying for your car loan within the year or do you expect you bification to the terms of your mortgage? | our mortgage | payment to incl | ease of decrease because of a |
| _ | No. | | | |
| | | | | |
| | Yes. Explain here: | | | |

Official Form 106J Schedule J: Your Expenses pa Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 30 of 47

| Fill in thi | is information to identify your | case: | | | |
|--|---|---|------------------------------|---|--|
| Debtor 1 | Nicholas Ryan Pe | | | | |
| Dahtana | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, f | | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | NORTHERN DISTRIC | CT OF CALIFORNIA | | |
| Case nur | mber | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Decl If two ma You must obtaining | I Form 106Dec aration About a rried people are filing togethe t file this form whenever you fi money or property by fraud in both. 18 U.S.C. §§ 152, 1341, 1 | r, both are equally resp le bankruptcy schedul n connection with a ba | oonsible for supplying corr | ect information. Making a false staten | nent, concealing property, or , or imprisonment for up to 20 |
| | Sign Below | | | | |
| Did | you pay or agree to pay some | one who is NOT an atte | orney to help you fill out b | ankruptcy forms? | |
| | No | | | | |
| | Yes. Name of person | | | | uptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | er penalty of perjury, I declare they are true and correct. | that I have read the su | mmary and schedules filed | d with this declaration | and |
| Х | /s/ Nicholas Ryan Perry | | X | | |
| | Nicholas Ryan Perry Signature of Debtor 1 | | Signature of | Debtor 2 | |
| | Date July 12, 2019 | | Date | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

| Fil | l in this inform | ation to identify you | r case: | | | | | | | | |
|----------|---|---|--|---|--|---|--|--|--|--|--|
| De | btor 1 | Nicholas Ryan F | - | Lost Nome | | | | | | | |
| | ebtor 2 ouse if, filing) | First Name | Middle Name Middle Name | Last Name Last Name | | | | | | | |
| Un | ited States Bar | kruptcy Court for the: | NORTHERN DISTRICT C | OF CALIFORNIA | | | | | | | |
| C- | ise number | | | | | | | | | | |
| | nown) | | | | | Check if this is an amended filing | | | | | |
| St Be | as complete a | of Financial | Affairs for Indivio | re filing together, both ar | e equally responsible for so | | | | | | |
| | nber (if known |). Answer every que | | · | ny additional pages, write y | our name and case | | | | | |
| Pa | rt 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | _ | | | | | |
| 1. | What is your | current marital statu | is? | | | | | | | | |
| | ☐ Married■ Not married | ried | | | | | | | | | |
| 2. | During the la | Ouring the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | |
| | □ No | | | | | | | | | | |
| | _ | all of the places you I | ived in the last 3 years. Do no | ot include where you live no | w. | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior A | Debtor 2 Prior Address: | | | | | | |
| | 2957 Wind Antioch, C | ing Lane #83 A 94509 | From-To: 2017 - Noveml 2018 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: | | | | | |
| | ■ No □ Yes. Mal | es include Árizona, Ca | ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev thedule H: Your Codebtors (Of Ir Income | vada, New Mexico, Puerto I | | | | | | | |
| 4. | Fill in the total | I amount of income yo | nployment or from operating ureceived from all jobs and a have income that you receive | ill businesses, including par | t-time activities. | lendar years? | | | | | |
| | □ No ■ Yes. Fill | in the details. | | | | | | | | | |
| | | - | Debtor 1 | | Debtor 2 | | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$20,757.00 | ☐ Wages, commissions, bonuses, tips | , | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

page 1

Official Form 107

Total amount

paid

Amount vou

still owe

Was this payment for ...

Dates of payment

| Del | btor 1 Nicholas Ryan Perry | Case number (if known) | | | | | | | | |
|-----|--|--|---|---|---------------|---|--|--|--|--|
| | | | | | | | | | | |
| 7. | Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person is a business you operate as a sole proprietor. alimony. | artners; relatives of any gen n control, or owner of 20% of | neral partners; partners partners or more of their voting | erships of which yog g securities; and a | u are a gener | al partner; corporations agent, including one for | | | | |
| | ■ No □ Yes. List all payments to an insider. | | | | | | | | | |
| | Yes. List all payments to an insider. Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment | | | | |
| | | | paid | still owe | | | | | | |
| 8. | insider? | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. | | | | | | | | |
| | ■ No | | | | | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | this payment ditor's name | | | | |
| Par | rt 4: Identify Legal Actions, Repossession | one and Forcelosuros | • | | | | | | | |
| 9. | Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | y cases, small claims actior | | | ctions, suppo | rt or custody | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | ne case | | | | |
| 10. | Within 1 year before you filed for bankrup Check all that apply and fill in the details belo ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address | | erty repossessed, f | oreclosed, garnis | hed, attache | d, seized, or levied? Value of the | | | | |
| | | Explain what happene | d | | | property | | | | |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details. | ptcy, did any creditor, inc | | nancial institutior | , set off any | amounts from your | | | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date taker | action was | Amount | | | | |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes | | erty in the possess | | | efit of creditors, a | | | | |
| | | | | | | | | | | |
| Pai | rt 5: List Certain Gifts and Contributions | | | | | | | | | |
| 13. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. | ptcy, did you give any gift | s with a total value | of more than \$60 | 0 per person | ? | | | | |
| | Gifts with a total value of more than \$600 | Describe the gifts | | | s you gave | Value | | | | |
| | Person to Whom You Gave the Gift and Address: | | | the g | iits | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Best Case Bankruptcy

| 14. | Within 2 years before you filed for bankru | uptcy, d | id you give any gifts or contributions | s with a total | value of more than | s \$600 to any charity? | | |
|-----|---|-----------|---|-----------------------------------|-----------------------------------|---------------------------|--|--|
| | Yes. Fill in the details for each gift or co | ontributi | on. | | | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | | Describe what you contributed | | Dates you contributed | Value | | |
| | Alisha Ruch Burn Foundation. | , | \$100 per month | | Monthly | \$100.00 | | |
| | | | | | | | | |
| Par | t 6: List Certain Losses | | | | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? | otcy or | since you filed for bankruptcy, did yo | ou lose anyti | hing because of the | eft, fire, other disaster | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Describe the property you lost and how the loss occurred | Include | the amount that insurance has paid. Lice claims on line 33 of Schedule A/B: F | st pending | Date of your loss | Value of property lost | | |
| Par | t 7: List Certain Payments or Transfers | ; | | | | | | |
| | Include any attorneys, bankruptcy petition p No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y | | Description and value of any prope transferred | Date payment or transfer was made | Amount of payment | | | |
| | The Law Offices of E. Vincent Wood 1501 N. Broadway, Suite 261 Walnut Creek, CA 94596 vince@woodbk.com | d | Attorney and Filing Fees | | July 2019 | \$2,035.00 | | |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that | litors or | to make payments to your creditors | | r transfer any prop | erty to anyone who | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any prope transferred | erty | Date payment or transfer was made | Amount of payment | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | | |
| | Yes. Fill in the details. Person Who Received Transfer | | Description and value of | | any property or | Date transfer was | | |
| | Address Person's relationship to you | | property transferred | payments paid in exc | received or debts change | made | | |

Case number (if known)

Official Form 107

Debtor 1 Nicholas Ryan Perry

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

| Deb | otor 1 Nicholas Ryan Perry | | Ca | ase number (if known) | |
|-----|---|--|---|--|---|
| | | | | | |
| | Person Who Received Transfer Address | Description and property transfe | | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| | Person's relationship to you | | | para in exonange | |
| | Milton Brown; Candy S. Jimenez | Sale of 2957 W #83, Antioch, 0 | | \$16,967.55 | December 2018 |
| | None | | | | |
| 19. | Within 10 years before you filed for bankru beneficiary? (These are often called asset-p ■ No □ Yes. Fill in the details. | | ny property to a se | lf-settled trust or similar device | e of which you are a |
| | Name of trust | Description and | value of the proper | rty transferred | Date Transfer was |
| | | | | | made |
| Par | t 8: List of Certain Financial Accounts, I | nstruments, Safe Depos | it Boxes, and Stora | age Units | |
| 20. | Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution No Yes. Fill in the details. | or other financial acco | unts; certificates of | - | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | or Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | Bank of the West | XXXX- | ☐ Checking ■ Savings ☐ Money Market ☐ Brokerage ☐ Other | Closed by Bank in 2019 | \$0.00 |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. | l year before you filed fo | or bankruptcy, any s | safe deposit box or other depo | sitory for securities, |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | escribe the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit | t or place other than you | ur home within 1 ye | ar before you filed for bankrup | tcy? |
| | No | | | | |
| | ☐ Yes. Fill in the details. | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | escribe the contents | Do you still have it? |

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

| Par | t 9: Identify Property You Hold or Control for S | Someone Else | | | | |
|--|---|--|--------------------------------------|-----------------------|--|--|
| 23. | B. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | r, or hold in trust | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | |
| Par | t 10: Give Details About Environmental Informa | ation | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances. | ir, land, soil, surface water, ground | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | • | law, whether you now own, operate, | or utilize it or used | | |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s | | waste, hazardous substance, toxic | substance, | | |
| Rep | ort all notices, releases, and proceedings that yo | ou know about, regardless of wher | n they occurred. | | | |
| 24. | Has any governmental unit notified you that you | ı may be liable or potentially liable | under or in violation of an environm | ental law? | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any envi | ronmental law? Include settlements | and orders. | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | |
| Par | t 11: Give Details About Your Business or Con | nections to Any Business | | | | |
| 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busin | | | y business? | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | |
| ☐ An officer, director, or managing executive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

| Del | otor 1 Nicholas Ryan Perry | Ca | se number (if known) |
|-------------|--|---|---|
| | _ | | |
| | No. None of the above applies. Go to F | Part 12. | |
| | ☐ Yes. Check all that apply above and fill | in the details below for each business. | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. |
| | | name of accountant of accintoper | Dates business existed |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | |
| | ■ No | | |
| | ☐ Yes. Fill in the details below. | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | |
| Pai | t 12: Sign Below | | |
| are with | | false statement, concealing property, or o | declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both. |
| /s/ | Nicholas Ryan Perry | | |
| | cholas Ryan Perry mature of Debtor 1 | Signature of Debtor 2 | |
| Dat | te July 12, 2019 | Date | |
| Did ■ N | you attach additional pages to Your Stateme | ent of Financial Affairs for Individuals Filin | g for Bankruptcy (Official Form 107)? |
| | | | |
| Did | you pay or agree to pay someone who is not | an attorney to help you fill out bankruptc | y forms? |
| | ** | | 10' (0'' : 15 110) |
| \square | es. Name of Person . Attach the Bankru | ptcy Petition Preparer's Notice, Declaration, a | and Signature (Official Form 119). |

Official Form 107

page 7

| ation to identify your | case: | | | |
|------------------------|--|---|---|---|
| | | | | |
| First Name | Middle Name | Last Name | | |
| | | | | |
| First Name | Middle Name | Last Name | | |
| ruptcy Court for the: | NORTHERN DISTRICT | OF CALIFORNIA | | |
| | | | | |
| | | | | Check if this is an mended filing |
| | n for Individu | uals Filing Unde | | 12/15 |
| | Nicholas Ryan Per First Name First Name Kruptcy Court for the: | Nicholas Ryan Perry First Name Middle Name First Name Middle Name Kruptcy Court for the: NORTHERN DISTRICT | Nicholas Ryan Perry First Name Middle Name Last Name First Name Middle Name Last Name Kruptcy Court for the: NORTHERN DISTRICT OF CALIFORNIA | Nicholas Ryan Perry First Name Middle Name Last Name First Name Middle Name Last Name Kruptcy Court for the: NORTHERN DISTRICT OF CALIFORNIA |

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|--|--|---|
| Creditor's Challenge Financial Services name: Description of property securing debt: Challenge Financial Services 2006 GMC Sierra SLE 167,000 miles Good Condition Location: 2094 Tenaya Court, Brentwood CA 94513 | ■ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | □ No ■ Yes |
| Creditor's Freedom Road Financial name: Description of property securing debt: Descr | □ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. ■ Retain the property and [explain]: Debtor will retain collateral and make regular payments. | □ No ■ Yes |
| Creditor's Harley Davidson Financial | ■ Surrender the property. | □No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Best Case Bankruptcy

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

| Debto | r1 Nich | olas Ryan Perry | Case number (if know | wn) |
|------------------|--------------------------------------|--|--|---|
| nan | ne: | | ☐ Retain the property and redeem it. | ■ Yes |
| pro | scription of perty uring debt: | 2012 Harley Davidson FLH Street Glide 46,000 miles Good Condition Location: 2094 Tenaya Cou Brentwood CA 94513 | ☐ Retain the property and [explain]: | |
| Part 2 For an | y unexpire | our Unexpired Personal Property d personal property lease that y n below. Do not list real estate le | / Leases /ou listed in Schedule G: Executory Contracts and Unexpeases. Unexpired leases are leases that are still in effect; | ired Leases (Official Form 106G), fill the lease period has not yet ended. |
| You ma | ay assume | an unexpired personal property | y lease if the trustee does not assume it. 11 U.S.C. § 365(p | o)(2). |
| Descr | ibe your u | nexpired personal property leas | es | Will the lease be assumed? |
| | r's name: iption of lea | sed | | □ No |
| Prope | • | | | ☐ Yes |
| | r's name: ption of lea | sed | | □ No |
| Prope | • | | | ☐ Yes |
| | r's name: ption of lea | sed | | □ No |
| Prope | • | | | ☐ Yes |
| | r's name: iption of lea | has | | □ No |
| Prope | • | Seu | | ☐ Yes |
| | r's name: | | | □ No |
| Prope | ption of lea | sea | | ☐ Yes |
| | r's name: | and | | □ No |
| Prope | ption of lea | seu | | ☐ Yes |
| | r's name: | and | | □ No |
| Prope | iption of lea rty: | sea | | ☐ Yes |
| Part 3 | Sign B | elow | | |
| | | perjury, I declare that I have ind ubject to an unexpired lease. | licated my intention about any property of my estate that | secures a debt and any personal |
| | | s Ryan Perry | X | |
| | licholas F Signature of | Ryan Perry Debtor 1 | Signature of Debtor 2 | |
| Г | Date .lı | ılv 12 2019 | Date | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| (| Chapter 7: | Liquidation | |
|---|-------------|--------------------|--|
| | \$245 | filing fee | |
| | \$75 | administrative fee | |
| 4 | <u>\$15</u> | trustee surcharge | |
| | \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 2

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing tee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 4

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF CALIFORNIA

| In re | Nicholas Ryan Perry | Case No. |
|-------|---------------------|---|
| | | |
| | Debtor(s). | / |
| | CREDITOR I | MATRIX COVER SHEET |
| - | | ling Matrix, consisting of <u>2</u> sheets, contains the correct, ll priority, secured and unsecured creditors listed in debtor's erk's promulgated requirements. |
| DATE | TED: July 12, 2019 | |
| | | /s/ E. Vincent Wood |
| | | Signature of Debtor's Attorney or Pro Per Debtor |

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Challenge Financial Services Attn: Bankruptcy 1004 West Taft Ave Ste 100 Orange, CA 92865

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

EDD C/O Bankruptcy Group MIC 92E PO Box 826880 Sacramento, CA 94280

Franchise Tax Board PO Box 942867 Sacramento, CA 94267

Freedom Road Financial Attn: Bankruptcy Dept. 10509 Professional Circle, Suite 202 Reno, NV 89521

Harley Davidson Financial Attn: Bankruptcy Po Box 22048 Carson City, NV 89721

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 46 of 47

State Board of Equalization P.O. Box 942879 Sacramento, CA 94279

U.S. Attorney General Civil Trial Sec. Western PO Box 683 Ben Franklin Washington, DC 20044

United States Attorney's Office Attn: Chief Tax Division 450 Golden Gate Ave. 10th San Francisco, CA 94102

Case: 19-41584 Doc# 1 Filed: 07/12/19 Entered: 07/12/19 14:48:45 Page 47 of 47